

PERSONIX LAYOUT
STATE OF ARIZONA - HMA
Identification Card
(Rev. 09/16/04)

Insert Front

Insert Back

EMPLOYEE NAME
ADDRESS
CITY, ST ZIP

AZ Benefit Options-Harrington
PO Box 33396
Phoenix AZ 85067-3396

This is your new member ID card for the Arizona Benefit Options Program. You will need to show this card when you receive medical care or prescription medication. Please verify that your information on the front is correct. If you need additional cards, need a correction made or have a question, please call Customer Services at 1-888-999-1459.

This card uses a unique 9 digit number (not your Social Security Number) to protect your privacy.

Please note, your PCP may have been auto-assigned due to an invalid PCP record number reported during the enrollment form.



RAN+AMN – EPO Plan

RAN+AMN service area is comprised of the State of AZ, Blythe CA, Needles CA, Henderson NV, Las Vegas NV, Laughlin NV, Mesquite NV, Farmington NM, Gallup NM, Kanab UT, and St. George UT

Client ID#: 3J
Patient Name:
Member ID:
Effective Date:
PCP Name:

| | | | |
|-------------|----------------|----------------|--------------------|
| PCP Visit | \$10 | RxBIN 603286 | |
| Specialist | \$10 | RxPCN 01410000 | Rx Member Services |
| Hospital ER | \$75 | RxGrp 512298 | Help Desk |
| Urgent Care | \$20 | Issuer: 80840 | 1-866-722-2141 |
| RX | \$10/\$20/\$40 | | |

Customer Service # 1-888-999-1459

This card and/or pre-certification does not guarantee coverage.



Travel network applies outside the service area.

To verify a provider's status in the EPO network call:
1-888-999-1459
www.myazhealth.com

Send all claims to:
AZ Benefit Options - Harrington
PO Box 785
Pueblo, CO 81002-0785
Payor ID# 95266

PRE-CERTIFICATION REQUIREMENTS

ATTENTION EMPLOYEES, HOSPITALS, AND PHYSICIANS: Call before a scheduled hospital admission or within 2 work days after an emergency admission, otherwise benefits may be reduced or denied. You must also call to pre-certify specific outpatient services.

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